

EPSDT

EPSDT stands for Early and Periodic Screening, Diagnostic and Treatment. EPSDT is a benefit for children and young adults under age 21 who have Medicaid. The EPSDT benefit makes sure that children and young adults receive complete and preventive medical care. EPSDT is key to making sure that children and young adults receive the care that they need. EPSDT includes different kinds of health care. The health care provided under EPSDT includes preventive, dental, mental health, developmental, and specialty medical care.

Early	Checking for and finding problems early
Periodic	Checking the health of children and young adults at specific times based on age
Screening	Providing physical, mental, developmental, dental, hearing, vision, and other tests to check for possible problems
Diagnostic	Performing tests to help diagnose problems when a risk is identified
Treatment	Controlling, correcting or reducing health problems found

EPSDT

- Complete health and developmental history
- Complete physical exam
- Appropriate immunizations (according to the Advisory Committee on Immunization Practices)
- Laboratory tests (including lead screening)
- Health Education (guidance on topics like child development, healthy lifestyles, and accident and disease prevention)

Vision Services

EPSDT covers a doctor finding and treating problems with vision. This coverage also

includes eyeglasses. The state tells your doctor when vision services should be provided.

Vision services are also provided at other times if there is a medical need. Vision services must be provided according to the state's schedule, and at other times as medically necessary.

Dental Services

EPSDT covers dental services such as pain relief, treatment for infections, fixing problems with teeth, and check-ups. The state works with dental organizations to decide when dental services should be provided.

Hearing Services

EPSDT covers a doctor finding and treating problems with hearing. This coverage also includes hearing aids.

Other Necessary Healthcare Services

States must also pay for any other medical care that is included under the Federal Medicaid program. These additional services must be medically necessary. The services must treat, correct or reduce illnesses and conditions that a doctor discovers during an EPSDT visit. The state will determine medical necessity on a case-by-case basis.

Diagnostic Services

Diagnostic services are tests that tell a doctor when there is a medical problem. These tests may also help to find out how serious the problem is and what caused it. These tests must be provided if a doctor finds a possible problem during the EPSDT visit. Diagnostic services may require a referral. Referrals should be made right away. The doctor will follow up on the referral to make sure the child or young adult receives the special care that is needed. The state's quality assurance team will make sure that complete care is provided.

Treatment

The doctor may find physical or mental illnesses or conditions during an EPSDT visit. If an illness or condition is found by the doctor, the health care services needed to treat the illness or condition must be provided.



IMPORTANT NOTICE

Well-Child Benefits

For members currently eligible for the Delaware Medical Assistance Program and Delaware Healthy Children Program



DELAWARE HEALTH AND SOCIAL SERVICES
Division of Medicaid & Medical Assistance

Dental Benefits for Children

State of Delaware Medical Assistance Program Dental Coverage

Who is eligible for children's dental services?

- Medicaid infants and children through age 20.
- Delaware Healthy Children Program (DHCP) infants and children through age 18.

What card do I use for my dental benefits?

The State of Delaware Medical Assistance card is burgundy and white or burgundy and gray.

How do I find a participating dental provider or dental specialist in my area?

<http://www.insurekidsnow.gov/state/>

Follow the link and choose Delaware to search for dental benefits and dental providers. Under Find a Dentist, Expand [+] will search by language, specialist, and location.

Your comprehensive dental package includes:

- Preventative: Exams, cleaning, x-rays, fluoride, (every six months) and sealants.
- Restorative care: Fillings, crowns, root canals, extractions, partials, dentures.
- Orthodontics: Examination by orthodontist and orthodontic records.

Limited and comprehensive orthodontics only covered when criteria met.

Braces are not covered for cosmetic reasons.

Baby teeth are important! Schedule your child for a visit with a dentist by their first birthday!

Infant Dental Care

- Every infant should receive an oral health risk assessment from his/her primary health provider or qualified health care professional by six months of age.
- Every infant should have a dental home by 12 months of age.
- After breast-feeding or bottle feeding, wipe gums with wet soft cloth to remove bacteria.
- Once tooth appears, use a soft infant toothbrush with a pea size amount of fluoridated toothpaste.
- Children ages one through six should not drink more than 4-6 ounces of fruit juice per day.

Medical Coverage for Fluoride Varnish

Your Medical Benefit now covers the application of fluoride varnish and an oral health risk assessment in physician offices. Fluoride varnish has been proven to be an effective tool to aid in preventing cavities.

Children six months to five years can receive a fluoride varnish to all teeth with a physician during a well-child visit one time in six months. **This service does not replace the need for a child to see a dentist by age one and every six months.**

**For questions about your dental benefits, call
1-800-372-2022.**

Can I get a ride to my dental appointment?

- Non-Emergency Medical Transportation (MET) is provided to and from dental appointments for eligible Medicaid members only when a member has no other means of transportation.
- Transportation arrangements should be made no less than two days in advance of a scheduled appointment.
- **Contact LogistiCare at 1-800-412-3778 for more information.**

Front and Back of DMAP Card:



STATE OF DELAWARE
MEDICAL ASSISTANCE PROGRAM

This card **does not** guarantee eligibility.

To the Provider: Verify eligibility by EVS or by calling Provider Services:
Statewide: 1-800-999-3371

To the Card Holder: If you have questions about the card or your medical coverage, please call Customer Relations:

Statewide: 1-800-372-2022
New Castle County: (302) 255-9500

Carry this card with you at all times.